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FAMILY NAME:	OSTERMANN	DELAY WAIVED (Y/N):	N
GIVEN NAME:	DIRK	DEMAND RECEIVED (Y/N):	Y
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NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	047763-5014	COUNTRY:	
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER:	009629	TELEPHONE 0000000000
			FAX

NAME: MORGAN, LEWIS & BOCKIUS

STREET: 1800 M STREET NW

CITY: WASHINGTON

STATE/COUNTRY: DC ZIP: 200365869

EMAIL:

APPLICATION TITLES:

APPARATUS FOR REMOVING A SAMPLE FROM AN ARRAY OF SAMPLES AND A CUTTING
TOOL FOR USE WITH THAT APPARATUS

TAB TO LAST POSITION,PUSH SEND



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Bib Data Sheet

SERIAL NUMBER 09/509,215	FILING DATE 02/07/2001 RULE -	CLASS 083	GROUP ART UNIT 3724	ATTORNEY DOCKET NO. 047763-5014
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APPLICANTS

Dirk Ostermann, South Australia, AUSTRALIA;
Cheng Hong Bing, South Australia, AUSTRALIA;
Pieter Faber, South Australia, AUSTRALIA;
George Kraguljac, South Australia, AUSTRALIA;
Andrew Arthur Gooley, New South Wales, AUSTRALIA;

** CONTINUING DATA ***** OK
THIS APPLICATION IS A 371 OF PCT/AU98/00813 09/25/1998

** FOREIGN APPLICATIONS ***** OK
AUSTRALIA PO 9438 09/25/1997
AUSTRALIA PP 3615 05/20/1998

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY AUSTRALIA	SHEETS DRAWING 10	TOTAL CLAIMS 12	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>				

ADDRESS

009629

TITLE

Apparatus for removing a sample from an array of samples and a cutting tool for use with that apparatus

FILING FEE RECEIVED 1178	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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